	<del></del>		· · · · · · · · ·	CHON FEE	DETERMIN	ATION REC	ORD	n unless il d	isplays a valid	OMB control imber.	
		10 0/3							pocket Number		
•		CLAIMS AS FILED - PART I (Column 1) (Column 2)							10 6	57,236	
	1	EOO (COUM)				· s	SMALL ENTITY		01	THER THAI	
٠. ٠	BASIC FEE	BASIC FEE NUMBER FILED NUMBER C						Of	SM	ALL ENTIT	
	(37 CFR 1.16(a	(37. CFR 1.16(a))				RA	TE FEE	.			
٠.	TOTAL CLAIKE	TOTAL CLAIMS						-	RATE	. FØ	
	(37 CFR 1.16(c	NDEPENDER: minus 20 = .					<u> </u>	OR		7	
	(37 CFR 1.16(b)	CLAIMS				- x s <u>2</u>	5. 1		<u> </u>	s	
				nus 3 =   -				OR	x s 50	· 1	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(d))					x s 10		00	x , 200	7	
						+5.18	10	OR		- 1	
	" " ie dilierenc	e difference in column 1 is less than zero, enter "0" in column 2.					=	· OR	+360		
- 1				ED - PART I		TOTA	· L	OR	TOTAL		
- 1				== 1 VI(1)	ſ				*		
ŀ	1	· (Column		(Column	(Column	3)		•			
- 1	< 4 5 L	. CLAIMS REMAININ		HIGHES		SMA	LL ENTITY	OR	OTHE	R THAN	
- 1	51 110	AFTER	. 1	NUMBER	R.   PRESEN	T . RATE		了 ·	SMAL	LENTITY	
. 1	Y Total	AMENOME	NT	PREVIOUS PAID FOR	EXTRA	1 1	ADDI- TIONAL	1	RATE		
	(3) CFR 1.16(c)	n   11	Min	15 1.	-		FFF	ľ		ADO- TIONIL	
	Total  O CFR 1.16(c)  Independent  O CFR 1.16(c)  O CFR 1.16(c)		Mine	29		$\int x_{s} 25$	=	7		FEE	
- 1.	Σ ├──		1	1 4	=/.	x s 100		OR	$\times 50$	1 1.	
	FIRST PRESE	ENTATION OF MULT	IPLE DEPE	MOCALE C		× 5 100	=   	OR	x s 20Q		
- [	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					]   +s 180;	.	7 . 1		l	
	(Column 1)					TOTAL	-	OR [	+5360		
_						. ADD'L FEE		OR	TOTAL ADO'L FEE		
10	0	CLAIMS		(Column 2	1 (Column 3)			- ·	MOUCHEE (		
Ŀ	-1	REMAINING		HIGHEST NUMBER	PRESENT	]	T	ı	· ·	A	
ű	1	AFTER AMENDMENT	.	PREVIOUSLY	EXTRA	RATE	ADDI-		RATE		
1 2	Total (37 CFR 1.16(d)		Minus	PAID FOR	<del></del>	1.	TIONAL FEE		, W.E	ADDI- TIONAL	
lž	Independent	<del> </del>	-		-	× s 25 =		'		FEE	
AMENOMENT	(3) CFR 1.16(6))		Minus		=		<del>                                     </del>	OR	( <u>5</u> 50 =		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					× s 100= + s 180=		OR X	s 200=		
ŀ								OR	360		
			TOTAL ADO'L FEE		Ť	OTAL					
<del> </del>	· · · · ·	(Column 1)		(Column 2)	(Cal			OR A	ODILEEE		
O		CLAIMS . REMAINING	1	HIGHEST	(Column 3)				-		
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á	(31 OFR 1.16(c))	•	Minus		1=	0.5	FEE	- 1	1	TIONAL	
2	Independent (37 CFR 1.16(6))		Minus	*** :		x s 25 =	•		,50 <sub>=</sub>	FEE	
AMENDMENT			1		=	x s 1002		<u> </u>			
4	FIRST PRESENT	ATION OF MULTIPL	HT CLAIM (37 CF	R 1 16(d)			OR X	200			
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	If the entry in co	luma 1 is to !			TOTAL ADD'L FEE		10	TAL	<u></u>		
•	(the Highest Number of Column 2 wide to in the Column										
hia -	If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20.  The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.										

If the Highest Number Previously Paid For (N THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the public highest) including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.